171 056
SIN/NAS

CASEY
Surname/Nom

John
Given names/Prénoms

CANADIAN FORCES
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

Box: 1561

CF 478 (10/74)
7530-21-870-6931

COMPONENT
ÉLÉMENT CEF

410.9
cy.

REGIMENTAL DOCUMENTS

NAME CASEY JOHN. REGT. NO. 171056 UNIT 24th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2508 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				11201	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
						23 – 29
						15 – 29
						11 – 29

Bet 403482

1561

CANADIAN FORCES RECORDS CENTRE PERS JOINT ROOM

m.x.
5.3.20.
246

W. 2589
100M-11-18
17/2-29-1377

32

83rd Overseas Battn. C.E.F.

171056

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... John Casey
2. In what Town, Township or Parish, and in what Country were you born? ..... Brampton Ont.
3. What is the name of your next-of-kin? ..... Kathleen Casey (Sister)
4. What is the address of your next-of-kin? ..... The Cottage Norbury Ave Norbury SW
5. What is the date of your birth? ..... 22 Sept 1896
6. What is your Trade or Calling? ..... Machinist
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? ..... No
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

John Casey ..... (Signature of Man).

F. W. Williams ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Casey, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

John Casey ..... (Signature of Recruit)

Date July 17 1915 F. Williams ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Casey, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

John Casey ..... (Signature of Recruit)

Date July 17 1915 F. Williams ..... (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Niagara this 17 day of Sept 191 .

..... (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Chas. H. Wilson Capt ..... (Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of Casey John on Enlistment.

Apparent Age 19 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 36 ins.
Range of expansion ..... ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations:
- Church of England .....
- Presbyterian X
- Wesleyan .....
- Baptist or Congregationalist .....
- Other Protestants ..... (Denomination to be stated.)
- Roman Catholic .....
- Jewish .....

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

None

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date August 31 1915 Walter R. McPhail

Place Niagara Camp. Capt MO
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

R. Pellatt Lt Col (Signature of Officer)

Date ..... 191 .

Sm. X.

5-3-20,

H.C.

P-56

Rank 24th Name CASEY John Reg'l No. 171056

Unit ~~23rd to 39th Batt.~~ If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Niagara July 17th 1915. Place of Birth Brampton, Ont.

Name and Address, Next-of-Kin Kathleen Casey

"The Cottage" Norbury Ave. Norbury, Lon. Relationship Sister

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

PAY OFFICE, N.E. BRANCH, CANADIAN CONTINGENT, NOV 21 1916

Entered on N.E. Card Index

Checked by

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
										282		9 97					
25/9/15	31/10/15	37	1	37	37	10	3 70	10	50 70	309		24 33			34 30	16 40	$10.00 Balfour
1.11.15	30.11.15	30	1	30	30	10	3 ..		33			29 93			29 93	19 47	
1.12.15	31.12.15	31	1	31	31	10	3 10		34 10			34 49			34 49	18 98	
1-1-16	31-1-16	31	1	31	31	10	3 10		34 10			25 06			25 06	27 82	Trans to 22nd Battn.
1/2/16	29/2/16	29	1.	29	29	.10	2 90		31 90			5 23			5 23	54 49	B.O. 29/2/3.2.16
1/3/16	31/3/16	31	1.	31	31	10	3 10		34 10			2 62			2 62	85 97	T.S.O. 2nd Bn 1/4/16 B.O. 1/3/16
				189			18 90 10		217 90			131 93			131 93		

Settled

Checked

BALANCE TRANSFERRED TO NEW LEDGER.

31 1917

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

R—122.

Rank | Name CASEY John | Reg'l No. 171056

Unit 83rd to 39th Batt. | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Niagara July 17th 1915. | Place of Birth Brampton, Ont.

Name and Address, Next-of-Kin Kathleen Casey

"The Cottage" Norbury Ave. Norbury, Lon. S.W. | Relationship Sister

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Arrived in England.		- 5 OCT 1915	
3.2.16	OC39	Transf to 22nd Bn C.E.F.	Seliffe	3 2/16	PAII 29
21.2.16	O/C 22nd	Taken on Strength as left from England	Field	5.2.16	" 9
7.3.16	24th Bn.	Taken on Strength of 24th Bn. from 22nd Bn.	"	4.3.16	" 11
"	22nd Bn	Transf. to 24th Bn	"	3.3.16	" 11.
14.10.16	" "	Killed in Action	"	1.10.16.	CL A 347 OK
11.10.16	" "	Killed in Action	"	1.10.16	PVI 62.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents	
Date	From whom received					

171056

MEDICAL HISTORY SHEET.

Surname Casey *Christian Name* John

Examined { on 22nd day of July 1915
at Toronto

Approved by Wallace W. McDougall
Rank Capt. M.O.

Birthplace { City or Town Norbury
County Surrey England

Apparent age 19

Trade or occupation Machinist

Height 5 Feet 6 Inches.

Weight 142 Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 36 inches

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. ✗ Left.
Number 2

When Vaccinated last 1910

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
31.8.15		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
23.8.15		Wallace W. McDougall Capt. M.O.
27.8.15		M.O.
31.8.15		M.O.

Enlisted on 22 *day of* July *191*5 *at* Toronto.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	83rd Bn	171056		
Transferred to..	39th Bn CEF	171056		10-10-15

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439.

Surname Casey Christian Name John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

92431.—W6490/1535.—1,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 39th Res Batt. C.E.F.

Regimental No. 141056 Rank Pte. Name Casey. J.

Enlisted (a) 22-7-15 Terms of Service (a) Duration of War. Service reckons from (a) 22-7-15

Date of promotion to present rank ____ Date of appointment to lance rank ____ Numerical position on roll of N.C.Os. ____

Extended ____ Re-engaged ____ Qualification (b) ____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
7-2-16	C.B.D.	Arrived from England as reinforcement & taken on strength. 22nd Bn		5-2-16	101BD/3/212
17-2-16	"	Left C.B.D.		15-2-16	101 BD.3/222
18/2/16	OC Bn	Joined Unit	Field	16/2/16	B213 74-26/2/16
3-3-16	A.A.G.	Transferred to 24th Can. Bn.		3-3-16	Authy:A.A.G.Canadian Section K.E.3034,D/3-3-16. Part 11 Orders 11,D/7-3-16.
7.4.16	24 Can Bn	Joined Unit	Field	8.3.16	B213
5.10.16	.. .. ..	Killed in Action	"	1.10.16	K1-137/1645 237 dd. 11/10/16 AFO; 62 dd. 11/10/16

McHogan Capt.
For Officer i/c Can. Records,
Canadian Section.
G.H.Q. 3rd Echelon.

A. S. Burwalin Maj. Lt.-Col.
Commanding 39th Battalion, C. E. F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

No. 171056 Name Casey, J. ~~Sqn., Batty.~~, or Company "E" Corps 39th Res. Bn. C. E. F. Date of enlistment 22-7-15. G.C. Badges Service or Proficiency Pay

Date of last entry in Company Conduct Sheet No. and date of last drunk Period not reckoning towards freedom from extra fine Sheet No. one Signature O.C. Company, etc. C. F. Ritchie Maj. Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
						A. W. Buwalda Major LT. COL. COM. 39TH BN. C.E.F.			

Killed 1-10-16

Army Form B. 122

[P.T.O.

S.O. 785. W7436/1545. 2,500M. McC. & Co. Ltd.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

D.M.S. 1300.

Surname: Casey
Christian Name or Names: J.
Reg. No.: 171.056

Rank: Pte
Unit: 24th Bn. Batt.
Co.
Troop
Batty

Hospital
Date of Admission

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Killed in Action 1.10.16

DISPOSITION

Date

C.L. 14.10.16 4347.

REMARKS

Rpt. from Base

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

R.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm
1.		
2.		
3.		
4.		
5.		
6.		
7.		

(649-6-9309)

CARD No. D

FOLL.

SURNAME. Casey.

CHRISTIAN NAMES John

REGL. No. 171056 RANK Pte.

UNIT 83rd (1st R.D.) Batt.

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL Casey, Kathleen

RELATIONSHIP TO SOLDIER Sister.

ADDRESS No Stated

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Brampton. DATE

PLACE OF ATTESTATION Niagara, Ont. DATE 9-3-15.

O/S 20/8/15. 215/1

L. L. 90588.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-83b.

Sailed from Montreal per. S.S. "Corsican" 25/9/15

MARRIED SINGLE yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

R. 149.

Name CASEY. John. *Rank* PTE. *Reg. No.* 171056.

RL 25. C. 1934

Unit 24th. Battalion.

Next of Kin Miss ~~X~~ K. Casey. The Cottage. Norbury Ave. Norbury. London S W

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1-10-16.	KILLED IN ACTION.	A347.	13-10.	02795.	14.	10

REGT'L No 171056.

NAME Casey, John

H. Q. FILE No. 649-

RANK AND CORPS Pte. 24th Bn. Form 83 of Pt. R.A.

FOLLOWS

No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
O 2795.	13-10-16.	Killed in action Oct. 1st/16

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A347	Rep from Base	1-10-16	Killed in action

No. 171056 RANK Pte. NAME Casey, John

T. O. S. UNIT 83rd Battalion C. E. F.

M. D. 2.

PAID FROM 1915	PAID TO 1915	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Aug. 16	Aug. 31	✓		
Sept. 1	Sept. 24	✓	Trans. to Service Company	WO 19 of 27.9.15

Scroll Desp. JAN 13 1921 Reqn. No. 79930

Plague Desp. Reqn. No. P 10548

Casey, Pte. J. John. 649-C-9309

171056 24th Bn

3888

Name & Address of Legatee

not elig for 1914-1915 Star

Miss Kathleen Casey (sister)

106 Rosendale Rd

West Dulwich S.E. 21

England.

Medals & decorations

Name & Address of Next of Kin

W

As above

(Serial no: 765364)

P. & S.

W

Name & Address of Female Next of Kin

None

Mem.

N-C

bras.

W

727

(This form to be filled in by all ranks on voyage to Canada.)

.....

	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

l address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

tation in Military District to which a furlough warrant is required.....

..... Railway.....

, is your wife on board.....Number of children on board.....

ination.....

(Sgd.).....

DESP. MAR 29 1923
REGN No. 3556
B.T.S. Rd. 21423

Number 171056. Rank Cu.

Surname CASEY

Christian Name John.

Units 24th Bn Can Inf Theatre of War France

Date of Service 4-9-16.

Remarks (Sister) Miss Kathleen Casey,

Latest Address 106 Rosendale Rd.,
West Dulwich,
S. E. 21, Eng.

Roll No. B. Page 20432

200m.-6-21.

No. 41057 Rank Pte. Name Casey John

T. O. S. Unit 12th Regt. York Rangers.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
July 22	July 31	"	Quota for new Bn.	
Aug 1	Aug 15	"	on Quota for 3rd Bn.	

Married or Single S.

Place of Birth Brampton Ont.

Name and Address of Next of Kin Kathleen Casey
"The Cottage" Norbury Ave. Norbury London.

Relationship of Next of Kin Sister

Name and Address of Next of Kin

Relationship of Next of Kin

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Killed in Action	1-10-16	G.R.O. 347 14/12/16

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 17056 Rank Pte. Name Casey John

If in Perm. Corps What Unit — Unit 83rd 39th Transferred to 22nd Bn Date 1-3-16 Authority B.O. 29 3/2/16

Permanent Force Allowances — Transferred to 24th Bn Date 1-4-16 Authority B.O. 11 7/2/16

Place of Attestation Niagara — Transferred to W.R. Date 2.10.16 Authority G.R.O. 347 14/12/16

Date of Attestation July 17th 1915. — Transferred to Date Authority P.B. 8064

PAY OFFICE, N. E. BRANCH, NOV 21 1916, CANADIAN CONTINGENTS

Assigned Pay Monthly $ ✓ Date Effective

Payable to Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Entered on N.E. Card Index U-3

Checked by

Account transferred to Non-Effective Branch (Date) 9.11.16 Effect 2.10.16

Account transferred to Officers' Pay Branch (Date)

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
															217 90															131 93	85 97				
Apr 1/30															33.	957.	5/4/16.	1028	26/4/16.	M 905	27/3			2 61	2 61.					5 22.	113 75				
May 1-31	31	100	31	00	31	10	38	10							34 10	1114	3/5	1157	27/5					2 56	2 56	2 61				7 33	140 12				
June 1-30	30	-	30	00	30	-	3	00							33 00			1198	9/6						2 56.					2 56	170 56				
July 1-31	31	-	31	-	31	-	3	10							34 10	1243	24/6	1283	17/7					2 56	2 61					5 17	199 49				
Aug 1-31	31	-	31	-	31	-	3	10							34 10	1328	23/7	1371	12/8					2 61	2 62					5 23	228 36				
Sept. 1.30	30	-	30	-	30	.	3	-							33 00	1417	31/8/16.	1462	15/9/16					2 62	2 62					5 24	256 12				
Checked CMR Dutton Oct 1.	1		1		1			10							110															163 06	257 22				Drawn N.E. 9.11.16 Effect 2.10.16
															1020 30																257 22				
																								Balance transferred to N. E. Branch.											
June 17.																								257 22						257 22					#6605 In Full, 21/6/17.

PAY OFFICE, N. E. BRANCH, MAY 31 1917, CANADIAN CONTINGENTS

Small Lady's Sheet

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount		No. of Days	Rate	Amount		No. of Days	Rate	Amount					1		2		3		4		1	2	3	4				Credit	Debit			
			$	c.			$	c.			$	c.				No.	Date	No.	Date	No.	Date	No.	Date												

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
	ANTI-TYPHOID INOCULATIONS ETC
23/8/15	W.W. Mc Kenzie.
27/8/15	"
3k/8/15	"
	VACCINATIONS.
30/8/15	

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I Certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
For the Officer in Charge of Records
Canadian Contingents.

J.D.

DUPLICATE

171056
ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname CASEY *Christian Name* John

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Norbury Surrey County England.

Examined ... ... on 22nd day of July 1915, at Toronto

Declared Age ... ... 19 years days.

Trade or Occupation ... Machinist

Height ... ... 5 feet 6 inches.

Weight ... ... 142 lbs.

Chest Measurement: Girth when fully Expanded 36 inches. Range of Expansion 1 inches.

Physical Development ...

Vaccination Marks: Arm ... Right Left; Number 2

When Vaccinated 1910

Vision ... ... R.E.—V= L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*)

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*)

Approved by (*Signature*) W.W. Mc Kensie.
(*Rank*) Capt.
Medical Officer.

Enlisted ... ... at Toronto on 22nd day of July 1915.

	Corps.	Regtl. No.
Joined on Enlistment ...	83rd Bn	
Transferred to	39th Battn C.E.F.	171056

Became non-effective by ...

on day of 191 .
(*Signature*)
(*Rank*)

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in it have been taken from the Attestation Paper.

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD.

Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				